

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON  
AT SEATTLE**

STATE OF WASHINGTON, et al.,

Plaintiffs,

v.

DONALD J. TRUMP, in his official  
capacity as President of the United States of  
America, et al.,

Defendants.

NO.

DECLARATION OF T.O.

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ATTORNEY GENERAL OF WASHINGTON  
Complex Litigation Division  
800 Fifth Avenue, Suite 2000  
Seattle, WA 98104  
(206) 464-7744

1 I, T.O., declare as follows:

2 1. I am over the age of 18, competent to testify as to the matters herein, and make  
3 this declaration based on my personal knowledge.

4 2. I am the parent of S.O., a 14-year-old transgender, nonbinary teen. In addition to  
5 S.O., my wife and I have two other children. I am a marriage and family therapist, and I live in  
6 Spokane, Washington.

7 3. S.O. is a very private person. To honor their wishes, I am choosing to use initials  
8 that are not their actual initials in place of their full name. I also am using initials that are not my  
9 actual initials in place of my full name because my wife and I are concerned about possible  
10 retribution for making this declaration. S.O. attends a school that is in a politically and socially  
11 conservative area, and we're worried about them being targeted and harassed. We have seen  
12 pride flags defaced in our community. Two years ago, members of the Patriot Front were  
13 apprehended on their way to an annual pride event in a nearby city. They were charged with  
14 conspiracy to riot. We are afraid of the possibility of hate crimes. The President and his  
15 administration normalize and incite anti-trans harassment through the anti-trans language they  
16 use and the anti-trans policies they enact, such as the Executive Orders banning transgender  
17 people from military service and the one at issue here: banning lifesaving gender affirming care  
18 for anyone under 19. We do not want to be investigated or harassed by our own government.

19 4. S.O.'s gender was assigned female at birth, but looking back on it, they've always  
20 been nonbinary. At an early age, my wife and I learned that S.O. is autistic. We knew they were  
21 different from other neurotypical kids. As they were growing up, it was initially difficult to tell  
22 what behaviors and tendencies were connected to their autism and what might be related to their  
23 gender identity. They would have issues with gendered bathrooms, gendered clothing, being  
24 separated between boys and girls at school, or even being called a girl. It would cause them to  
25 get overwhelmed and distressed. They would have meltdowns, like a panic attack. These issues  
26 were ongoing and were often sparked by gendered experiences. These distressing experiences

1 increased at the onset of puberty because S.O. noticed changes in their body that they did not  
2 want. These changes made S.O. so anxious and uncomfortable that they would have dissociative  
3 symptoms, such as their mind going blank, being unable to speak, or unable look at and interact  
4 with others. As a parent, it was heartbreaking to see.

5         5. When these behaviors started showing up in subtle ways in early elementary  
6 school, my wife and I suspected that S.O. might be gender diverse but we felt conflicted and  
7 scared. At the time, we were still in a fairly conservative church community, and we had little  
8 understanding of trans and gender nonconforming identities. We were afraid life would be harder  
9 for S.O. and our family if they didn't abide by gender norms. We were afraid family and friends  
10 wouldn't accept or support S.O. because of their gender identity. We were scared because of the  
11 social environment we were in, because it wasn't open and affirming. We knew their coming out  
12 would have implications to our relationships and support systems. We didn't have anyone in our  
13 community that could help us process these concerns. Instead, we experienced a lot of  
14 transphobia.

15         6. Eventually, S.O. came out as nonbinary in July 2023 after sixth grade. They had  
16 been taking an improv class and when asked about their pronouns they felt safe enough to share  
17 their truth. A month or two later, they told us that they didn't feel connected to their name. They  
18 came out to the larger family in the fall of 2023, which unfortunately didn't go well. One side of  
19 our extended family believed that it was wrong because it didn't align with their values and  
20 religious beliefs. Their worldview doesn't know what to do with someone like my child. Most  
21 were willing to accommodate S.O.'s chosen name and pronouns but they couldn't understand  
22 S.O.'s identity.

23         7. We were very cautious about starting any kind of puberty blockers or hormone  
24 therapy. My wife and I read books, scientific articles, and reviews of research to educate  
25 ourselves and to try to better understand how to support our child. S.O. started attending a  
26 support group for transgender youth and seeing a gender affirming counselor after they came

1 out. They started discussing options for gender-affirming medical care with their therapist. In  
 2 early 2024, they first started wearing a chest binder and cut their long hair short.

3 8. The darkest moment in our journey was when S.O. disclosed to my wife that they  
 4 were having suicidal thoughts. They shared that they were thinking about it because they didn't  
 5 feel like they belonged, because they felt rejected by their family, and betrayed by their own  
 6 body. Due to S.O.'s ongoing distress and gender dysphoria regarding their puberty development,  
 7 we started discussing puberty blockers as a family. In the spring of 2024, S.O. came to my wife  
 8 and I and stated that they wanted to pursue medical treatment. After their first appointment in  
 9 June of 2024, with a doctor specializing in gender affirming care, S.O. expressed excitement at  
 10 the possibility that there were medical interventions that could help them feel more at home in  
 11 their own body. After getting our questions and concerns answered, my wife and I felt more  
 12 comfortable supporting this step. Moreover, we knew the risk to S.O.'s health and wellbeing of  
 13 them not taking puberty blockers was unquestionably greater than S.O. having access to gender-  
 14 affirming medical care.

15 9. The process of assessment and informed consent was thorough through the local  
 16 clinic where we sought care. There were interviews, which confirmed a diagnosis of gender  
 17 dysphoria, blood tests, bone density scans, and other tests to see if there were any underlying  
 18 conditions that would be contraindications. We discussed the risks and options with their  
 19 provider. After our initial appointment in June of 2024, we waited over three months before S.O.  
 20 received their first injection.

21 10. After starting puberty blocking treatment, the next step was legally changing  
 22 S.O.'s name. They had been using their chosen name for over a year and now they had legal  
 23 documents to prove it! It was exciting and relieving to see the tide begin to turn for S.O. As their  
 24 identity felt more affirmed and congruent in their own body, externally validated by a growing  
 25 community of affirming people, and now legally acknowledged, their mental and physical  
 26 wellbeing began to improve.

1           11. I find the transphobic misconceptions around gender-affirming care exasperating.  
2       Deciding whether a child needs gender affirming medical care is not a process any parent takes  
3       lightly. The decision is made after years of observation and discussion with our child, over the  
4       course of many doctor's visits, and with the advice of trained medical professionals, and after  
5       months, if not years, of our own research. My wife and I have dedicated so much to understand  
6       our child in order to overcome our own misconceptions. Our one regret is that we let our own  
7       fears and misunderstandings get in the way of getting our child treatment sooner.

8           12. Following the start of gender-affirming medical treatment, the difference in S.O.  
9       was incredible. I've seen that with the more gender affirming support and environment that we  
10      provide for our child, the more confident and open they become. Before, they couldn't tolerate  
11      music, but on puberty blockers they sing and dance. Before, they wouldn't hug people. Now,  
12      because they feel so much better in their own body, they have become so much more affectionate.  
13      Puberty blockers have helped reduce their sensory overwhelm and distress in their day-to-day  
14      life. They even auditioned for a play. They love theater and improv, and they read books all the  
15      time. They're interested in queer stories and queer rights. They are the happiest I've ever seen  
16      them since beginning gender affirming medical care.

17          13. If this Executive Order goes into effect, I am afraid of a reversal of everything  
18      we've gained. I'm worried about S.O. becoming more withdrawn and depressed. I'm worried  
19      they will lose their joy. I'm worried about the potential impacts medically, if we aren't able to  
20      make choices for their care. I'm also just as worried about the social impact. We all need care  
21      and connection, and I believe this Executive Order is fueling baseless stigma and prejudice,  
22      replacing our judgment about what is best for our child for the President's, who has not spent  
23      even one minute with our child. I'm incredibly worried about the dysphoria and depression  
24      coming back, and that it could lead to suicidal ideation. As a parent, I cannot think of anything  
25      worse.  
26

1 I declare under penalty of perjury under the laws of the State of Washington and the  
2 United States of America that the foregoing is true and correct.

3 DATED this 4th day of February 2025 at Spokane, Washington.

4 

5 \_\_\_\_\_  
T.O.  
6 Parent of S.O.